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# A Terrific Prescription Benefit Plan

## 2005 Pharmacy Plans



All medical plans now have **two pharmacy benefits** from which to choose. One is the **coinsurance-based plan**. The other, “**Consumer Choice**,” is focused on smart spending on pharmaceuticals, with some funding by Maricopa County, and includes a rollover feature allowing you to create a credit balance for unused money left on account.

### COINSURANCE RX



When you have a covered prescription filled under the “Coinsurance Rx” plan, you share the cost by paying a percentage of the contract rate (coinsurance) according to the following schedule.

Pharmacy	Medication	Copay
<b>Retail 30 day supply</b>	Generic	25% of contract rate (minimum \$2, maximum \$12)
	Preferred Brand Name	30% of contract rate (minimum \$5, maximum \$30)
	Non-Preferred Brand Name with generic equivalent	50% of contract rate plus the difference between brand and generic cost (minimum \$20)
	Non-Preferred Brand Name without generic equivalent	50% of contract rate (minimum \$20)
	Non-Preferred Specialty*	\$50 copayment
<b>Advantage 90</b>	Generic	25% of contract rate (minimum \$6, maximum \$36)
	Preferred Brand Name	30% of contract rate (minimum \$15, maximum \$90)
	Non-Preferred Brand Name with generic equivalent	50% of contract rate plus the difference between brand and generic cost (minimum \$60)
	Non-Preferred Brand Name without generic equivalent	50% of contract rate (minimum \$60)
	Non-Preferred Specialty*	Not available in more than 30-day supply
<b>Mail Service</b>	Generic	15% of contract rate (minimum \$6, maximum \$28)
	Preferred Brand Name	25% of contract rate (minimum \$15, maximum \$70)
	Non-Preferred Brand Name with generic equivalent	50% of contract rate plus the difference between brand and generic cost (minimum \$60)
	Non-Preferred Brand Name without generic equivalent	50% of contract rate (minimum \$60)
	Non-Preferred Specialty*	\$50 for 30-day supply through home delivery service

\* See information on reverse regarding Specialty medications.

(Please see other side for additional Consumer Choice information. →)

## CONSUMER CHOICE RX



The “Consumer Choice Rx” pharmacy benefit is a multi-level plan where Maricopa County fully funds the first level, you fund the second level — which functions as a deductible — and you and Maricopa County share the cost of the third level through coinsurance. The benefit is geared toward the smart spending of all funds through the use of the most cost-effective medication. Any unused portion of the first level is rolled over to the next benefit year, creating a credit balance to be used toward future prescription costs.

Levels	Description
<b>Pharmacy Account</b>	The account is funded 100% by Maricopa County at the rate of \$200 per individual or \$400 per family. You use this amount to pay for prescription costs as you choose, and there is no copay. This plan does not have an approved drug list (formulary) but certain drugs require prior authorization or use of certain medications in a specific order (step therapy). Quantity level limits apply to certain medications, and some drug classes, such as infertility and cosmetic medications, are excluded. Any unused portion is rolled over to the next benefit year. Amounts spent from the pharmacy account do not accumulate towards the \$1,500/\$3,000 out-of-pocket maximum.
<b>Employee Responsibility</b>	You are responsible for the deductible, which is funded 100% by you at the rate of \$200 per individual or \$400 per family. You spend the deductible amount toward your prescription costs as you choose. If you have enrolled in the Mariflex flexible spending account, you can use your pre-taxed funds to pay for medication costs in this level. Amounts spent towards the deductible accumulate towards the \$1,500/\$3,000 out-of-pocket maximum.
<b>Insurance</b>	The insurance level covers 80% of the cost (contract rate) of the medication. You pay 20%. Amounts spent as coinsurance accumulate toward the \$1,500/\$3,000 out-of-pocket maximum.
<b>Specialty Medication</b>	<p>Specialty pharmacy medications will not be charged against your pharmacy account or deductible. Instead, a \$50 copayment will be charged. The out-of-pocket expense will be applied toward out-of-pocket maximums.</p> <p>*Specialty medications are received through the Specialty Pharmacy program and focus on expensive and difficult-to-find medications, injectables or other medications involving complex administration methods, strict compliance requirements, special storage, handling and delivery, education, monitoring and ongoing patient support. Specialty Pharmacy patient conditions include acromegaly, chronic granulomatous disease, cystic fibrosis, gaucher disease, hemophilia, multiple sclerosis, HIV/AIDS, viral hepatitis, some oncology-related conditions, psoriasis, rheumatoid arthritis, growth hormone disorders, respiratory syncytial virus (RSV), solid organ transplant; and deep vein thrombosis. Amounts spent as copayments for specialty medications accumulate toward the \$1,500/\$3,000 out-of-pocket maximum.</p>